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Mar 10 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **755830** (7)
1. Corporation Name
JACKSONVILLE ECONOMIC DEVELOPMENT COMPANY, INC.



Principal Place of Business JOSEPH E. WHITAKER 128 EAST FORSYTH STREET, SUITE 500 JACKSONVILLE FL 32202	Mailing Address JOSEPH E. WHITAKER 128 EAST FORSYTH STREET, SUITE 500 JACKSONVILLE FL 32202
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3. Date Incorporated or Qualified 01/12/1981
4. FEI Number 59-2157833
Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business 21 220 E. Bay Street Suite, Apt. #, etc. 22 Suite 404-A City & State 23 Jacksonville, Florida Zip 24 32202	2a. Mailing Address 26 220 E. Bay Street Suite, Apt. #, etc. 27 Suite 404-A City & State 28 Jacksonville, Florida Zip 29 32202
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5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent JOSEPH E. WHITAKER , 128 EAST FORSYTH ST. SUITE 500 JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent 81 Name Joseph E. Whitaker 82 Street Address (P.O. Box Number Is Not Acceptable) 220 E. Bay Street, Suite 404-A 83 84 City Jacksonville FL 85 Zip Code 32202

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> DELETE JOSEPH E. WHITAKER , 128 E. FORSYTH STREET, SUITE 500 JACKSONVILLE FL 32202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> DELETE GREENE, ARNETT 2737 EDGEWOOD AVE, W JACKSONVILLE FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C <input type="checkbox"/> DELETE IRELAND, LOCK W 225 WATER ST., SUITE 1575 JACKSONVILLE FL 32202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> DELETE RICHARD TOSH 3740 BEACH BLVD. JACKSONVILLE FL 32207
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> DELETE PAPPAS, LYNN 200 WEST FORSYTHE ST #1400 JACKSONVILLE FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input type="checkbox"/> DELETE RON WILKINS, 50 N. LAURA STREET, STE. 3700 JACKSONVILLE FL 32202

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Joseph E. Whitaker 220 E. Bay St., Suite 404-A Jacksonville, FL 32202
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Ron Wilkins 1301 Riverplace Blvd., #1901 Jacksonville, FL 32202

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Joseph E. Whitaker* 2/24/98 630-1624

CP2E037 (10/97)